



## UNITED STATES PATENT AND TRADEMARK OFFICE

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Bib Data Sheet

CONFIRMATION NO. 5220

|  |  |                               |   |  |                                |
|--|--|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/940,512   | <b>FILING DATE</b><br>08/29/2001<br><b>RULE</b>  | <b>CLASS</b><br>703           | <b>GROUP ART UNIT</b><br>2123   | <b>ATTORNEY DOCKET NO.</b><br>3731-0177P |                                |
| <b>APPLICANTS</b><br>Stuart T. Stanton, Bridgewater, NJ;   |  |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>THIS APPLN CLAIMS BENEFIT OF 60/270,872 02/26/2001 <i>H.D.</i>  |  |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>NONE.</i>   |  |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 09/29/2001</b>   |  |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verified and Acknowledged <i>Henry Der Day</i><br>Examiner's Signature Initials |  | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>16                | <b>INDEPENDENT CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>HARNESS, DICKEY & PIERCE, P.L.C.<br>P.O. Box 8910<br>Reston, VA 20195 <i># 30 595</i>  |  |                               |   |  |                                |
| <b>TITLE</b><br>Projection electron beam lithography apparatus and method employing an estimator   |  |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>840  | <b>FEES:</b> Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |